fered from severe neuralgia at intervals for many years and whose hair had become gray on one side of her head from this cause, expressed herself as having gained more relief from antikamnia tablets than from all of the many medicines which had been prescribed for her. For pain about the head from almost any cause, antikamnia tablets always have undoubted preference over all other remedies. They are a useful adjuvant in the treatment of migraine.

For the pain in cases of organic spinal disease, antikamnia and codeine tablets proved of great value. A woman of 52, with transverse myelitis (complete paraplegia) found these tables reliable for controlling the very annoying girdle pain. Two or three doses of two tablets each, within twenty-four hours, were sufficient to make the pain endurable. In another case, where there was the girdle sensation connected with its earlier history, and numbness and paraesthesia of the lower extremities existed, one antikamnia and codeine tablet was given three times a day, along with a regular potassium iodide treatment. The observation of this case has extended over 18 months and at no time has the progress been so satisfactory as during the last six weeks, in which she has taken antikamnia and codeine tablets regularly.

POST-GRIPPAL COMPLICATIONS.

If there is one particular feature which characterizes the genuine influenzal attack it is the decided and sometimes intense prostration that remains after the subsidence of the acute symptoms of the disease. This general vital "set back" is oftentimes entirely out of proportion to the severity of the original grippal aftack, and the most robust patients are sometimes the most severely prostrated. In addition to the general devitalization, la grippe is extremely likely to be accompanied with or followed by such troublesome complications as otitis, neuritis, sinus inflammatinn, gastro-intestinal derangements, resistant and obstinate bronchial catarrhs and, more dangerous than all, peculiar, more or less characteristic, asthenic, form of lobular pneumonia. The skill of the physician and the vital resistance of the patient are often taxed to the utmost in a combined effort to induce final recovery. Anæmia, to some degree, is almost always brought about by the combined devitalizing power of the disease and its complications, and convalescence is likely to be tardy and tedious. An easily borne, readily assimilable hematinic does much to hasten recovery, and Pepto-Mangan (Gude) is an especially eligible method of introducing the much-needed ferric and manganic elements, without producing or increasing digestive difficulty. In no condition does this well-tried hematic remedy evidence its undoubted reconstructive power more certainly than in the treatment of post-grippal convalescence.

